
Copay Dental Plan

Outline

Dental plan with preventive, basic and major service coverage copays. No waiting period for coverage or deductible.

Copays

Plan pays 100% of preventive services including cleanings. Copay schedule for basic and major services. See copay schedule, <https://planstin.com/wp-content/uploads/Planstin-Copay-Dental-Plan.pdf>.

Annual Limit

Plan will pay up to \$1,500 per year, per member.

Deductible

No deductible.

Network

Plan provides access to the Connection Dental® national PPO network of dental providers. You can search for a provider at www.ppousa.com or call 800-513-7177.

Rates

| Coverage Tier | Copay Dental |
|-----------------------|--------------|
| Employee | \$25 |
| Employee & Spouse | \$50 |
| Employee & Child(ren) | \$50 |
| Employee & Family | \$75 |

The above chart reflects the full monthly plan rates for the 2019 plan year and do not account for any employer contribution.